PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004										Application or Docket Number			
CLAIMS AS FILED - PART I SMALL EN										1/ 0/35 0 95 9			
L		·		(Column 1)		(Column 2)		TYPE		] 0		OTHER THAN SMALL ENTITY	
U.S. NATIONAL STAGE FEES			5 6	54			RATE		FEE		RATE	FEE	
BASIC FEE			SMALL E	SMALL ENT. = \$ 150		ARGE ENT. = \$ 300		BASIC FEE		一。	R BASIÇ FEE		
EXAMINATION FEE				= \$50/\$100		other situations = \$ 100 / \$ 200	7	EXAM. FEE	1	-	EXAM. FEE	30	
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		ALL other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	40	
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =		X \$ 125 =	<del>                                     </del>	7	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			57	minus 20 =	٠ ز	37	1	X \$ 25 =	<del>                                     </del>	OF	<b>-</b>	<b>-</b>	
INC	EPENDENT C	CLAIMS	2	minus 3 =	*		1	X \$ 100 =	<del>                                     </del>	OF		1850	
MU	LTIPLE DEPE	NDENT CLAIM PI	RESENT	7			1	+ \$ 180 =	<del>                                     </del>	OR	<b> </b>	1 2 :	
* If the difference in column 1 is less than zero, enter "0"					' in c	olumn 2	J	TOTAL	<del>                                     </del>	OR	L	3110	
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST								ENTITY	OR	OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	I	X \$ 25 =		OR	X \$ 50 =	<del></del>	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				AIM			+ \$ 180 =		OR	+ \$ 360 =		
										ÖR	TOTAL ADDIT.		
		(Column 1)		(Column		(Column 3)		T					
n Ž		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOR	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	r	X \$ 25 =		OR	X \$ 50 =	FEE	
CINICIACIMENI	ndependent	*	Minus	***		= .		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI				M			+ \$ 180 =		OR	+ \$ 360 =		
								OTAL ADDIT.		L	TOTAL ADDIT.		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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